

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			06-18
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	N m	585 905	7-20-01 9/4/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	X		
2	X		
3	X		
4	X		
5	X		
6	X		
7	X		
8	X		
9	X		
10	X		
11	X		
12	X		
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35	X		
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40	X		
41	X		
42	X		
43	X		
44	X		
45	X		
46	X		
47	X		
48	X		
49	X		
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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